

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

SEIU COPE (Service Employees International Union Committee On Political Education)

ADDRESS (number and street) ▼

1800 Massachusetts Ave NW

☐ Check if different than previously reported. (ACC)

Washington

DC

20036

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00004036

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☒ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Michael P. Fishman

Signature of Treasurer

Michael P. Fishman

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

SEIU COPE (Service Employees International Union Committee On Political Education)

Report Covering the Period: From: MM / DD / YYYY 02 / 01 / 2016 To: MM / DD / YYYY 02 / 29 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">YYYY</span> 2016		19299499.28
(b) Cash on Hand at Beginning of Reporting Period.....	19265437.69	
(c) Total Receipts (from Line 19) .....	1801641.04	3092303.63
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	21067078.73	22391802.91
7. Total Disbursements (from Line 31) .....	2297733.41	3622457.59
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	18769345.32	18769345.32
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	999383.83	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

SEIU COPE (Service Employees International Union Committee On Political Education)

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	1	6

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

1312.00

1739.00

(ii) Unitemized .....

1778264.18

3047307.55

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

1779576.18

3049046.55

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ►

1779576.18

3049046.55

## 12. Transfers From Affiliated/Other

Party Committees.....

22033.28

43192.96

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

31.58

64.12

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ►

1801641.04

3092303.63

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ►

1801641.04

3092303.63

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	863885.63	1874841.95
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	863885.63	1874841.95
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	19500.00	36500.00
24. Independent Expenditures (use Schedule E) .....	1156097.03	1165182.29
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	258250.75	545933.35
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2297733.41	3622457.59
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2297733.41	3622457.59

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	1779576.18	3049046.55
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1779576.18	3049046.55
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	863885.63	1874841.95
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	863885.63	1874841.95

: 97 'A-G79 @G B9CI G'H9LH'F9 @G H98 'HC'5 'F9DCFH'G7 <98I @G 'CF'+'H9A-N5HCB  
.

Form/Schedule: F3XN

Transaction ID :

Please note that for the independent expenditures that have been publicly disseminated, but not yet paid, the committee is using the obligation date, rather the payment date, on Schedule E, Line 24. In addition, the four independent expenditures for television and radio advertising production from 2/24/16 should not be considered new independent expenditures. The committee believed that the vendor that made the ad buys, Cardenas Strategies, had included the production costs in their invoice. It wasn't until the several weeks after the ads ran that the committee was invoiced separately for the production costs by Revolution Strategies. On the 2/16 24-hour notice, the committee disclosed that the New Florida Majority and Organize Now Inc. provided canvassing services for the Florida presidential primary. After reporting this activity, the committee learned that the New Florida Majority was not providing canvassing services and that Organize Now Inc. would be paid the original \$100,000 that was originally disclosed in addition to another \$100,000 that had previously been attributed to the New Florida Majority.

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 90  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. Ronald McMullen**

Mailing Address 11152 Orion Ave

City	State	Zip Code
Mission Hills	CA	91345

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

County of Los Angeles

Case Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2016

Transaction ID : C7079686

Amount of Each Receipt this Period

250.00

☐ Memo Item

\* Payroll Deduction: \$125.00 Semi-Monthly

Full Name (Last, First, Middle Initial)

**B. Christine Basua**

Mailing Address 449 W Santa Barbara St

City	State	Zip Code
Santa Paula	CA	93060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

County of Ventura

Human Services Employment Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2016

Transaction ID : C7079810

Amount of Each Receipt this Period

120.00

☐ Memo Item

\* Payroll Deduction: \$60.00 Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Donna Meredith**

Mailing Address 1750 W 242nd Pl

City	State	Zip Code
Torrance	CA	90501

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

N/A

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2016

Transaction ID : C7079756

Amount of Each Receipt this Period

100.00

☐ Memo Item

\* Payroll Deduction: \$50.00 Monthly

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

470.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 90

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

Full Name (Last, First, Middle Initial)

A. Thomas Balanoff

Mailing Address 1156 Ridgewood Drive

City State Zip Code  
Highland Park IL 60035

FEC ID number of contributing federal political committee.

C

Name of Employer

SEIU Local 1

Occupation

Int'l Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 23 2016

Transaction ID : C7077835

Amount of Each Receipt this Period

200.00

☐ Memo Item

\* Payroll Deduction: \$100.00 Bi-Weekly

Full Name (Last, First, Middle Initial)

B. Nancy E Cross

Mailing Address 604 Hinman Ave  
# 32

City State Zip Code  
Evanston IL 60202-3078

FEC ID number of contributing federal political committee.

C

Name of Employer

SEIU Local 1

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 23 2016

Transaction ID : C7077849

Amount of Each Receipt this Period

130.00

☐ Memo Item

\* Payroll Deduction: \$65.00 Bi-Weekly

Full Name (Last, First, Middle Initial)

C. Marcy Chong

Mailing Address 90 Bank St

City State Zip Code  
Lebanon NH 03766

FEC ID number of contributing federal political committee.

C

Name of Employer

SEIU

Occupation

Assistant Director of Research

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 16 2016

Transaction ID : C7079098

Amount of Each Receipt this Period

100.00

☐ Memo Item

\* Payroll Deduction: \$50.00 Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

430.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 90

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. Mary Kay Henry**

Mailing Address 4007 Connecticut Ave NW  
#414

City State Zip Code  
Washington DC 20008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SEIU

Occupation

International President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.00

Date of Receipt

02 / 16 / 2016

Transaction ID : C7079102

Amount of Each Receipt this Period

202.00

☐ Memo Item

\* Payroll Deduction: \$101.00 Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Valery Rey-Alzaga**

Mailing Address 3704 E. Colorado Avenue

City State Zip Code  
Denver CO 80210

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SEIU

Occupation

Organizer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

02 / 16 / 2016

Transaction ID : C7079156

Amount of Each Receipt this Period

50.00

☐ Memo Item

\* Payroll Deduction: \$25.00 Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Martha Lea Voland**

Mailing Address 28 Hammond St

City State Zip Code  
Portland ME 04101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SEIU

Occupation

Field Resources Deputy Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

02 / 16 / 2016

Transaction ID : C7079225

Amount of Each Receipt this Period

160.00

☐ Memo Item

\* Payroll Deduction: \$80.00 Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

412.00

1312.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 90

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

## **A. Workers United for Political Power Campaign Comm.**

Mailing Address 31 WEST 15TH STREET 3RD FLOOR  
 POLITICAL DEPARTMENT

City State Zip Code  
 NEW YORK NY 10011

FEC ID number of contributing  
federal political committee.

**C** C00462044

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

43192.96

Date of Receipt

**02** / **16** / **2016**

**Transaction ID : C7071860**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Transfer

Full Name (Last, First, Middle Initial)

## **B. Workers United for Political Power Campaign Comm.**

Mailing Address 31 WEST 15TH STREET 3RD FLOOR  
 POLITICAL DEPARTMENT

City State Zip Code  
 NEW YORK NY 10011

FEC ID number of contributing  
federal political committee.

**C** C00462044

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

43192.96

Date of Receipt

**02** / **16** / **2016**

**Transaction ID : C7071861**

Amount of Each Receipt this Period

2.00

☐ Memo Item

Transfer

Full Name (Last, First, Middle Initial)

## **C. Workers United for Political Power Campaign Comm.**

Mailing Address 31 WEST 15TH STREET 3RD FLOOR  
 POLITICAL DEPARTMENT

City State Zip Code  
 NEW YORK NY 10011

FEC ID number of contributing  
federal political committee.

**C** C00462044

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

43192.96

Date of Receipt

**02** / **16** / **2016**

**Transaction ID : C7071862**

Amount of Each Receipt this Period

6927.40

☐ Memo Item

Transfer

**SUBTOTAL** of Receipts This Page (optional)..... ►

6979.40

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 90

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

## **A. Workers United for Political Power Campaign Comm.**

Mailing Address 31 WEST 15TH STREET 3RD FLOOR  
 POLITICAL DEPARTMENT

City State Zip Code  
 NEW YORK NY 10011

FEC ID number of contributing  
federal political committee.

**C** C00462044

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

43192.96

Date of Receipt

**02** / **16** / **2016**

**Transaction ID : C7071863**

Amount of Each Receipt this Period

6506.03

☐ Memo Item

Transfer

Full Name (Last, First, Middle Initial)

## **B. Workers United for Political Power Campaign Comm.**

Mailing Address 31 WEST 15TH STREET 3RD FLOOR  
 POLITICAL DEPARTMENT

City State Zip Code  
 NEW YORK NY 10011

FEC ID number of contributing  
federal political committee.

**C** C00462044

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

43192.96

Date of Receipt

**02** / **16** / **2016**

**Transaction ID : C7071864**

Amount of Each Receipt this Period

330.35

☐ Memo Item

Transfer

Full Name (Last, First, Middle Initial)

## **C. Workers United for Political Power Campaign Comm.**

Mailing Address 31 WEST 15TH STREET 3RD FLOOR  
 POLITICAL DEPARTMENT

City State Zip Code  
 NEW YORK NY 10011

FEC ID number of contributing  
federal political committee.

**C** C00462044

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

43192.96

Date of Receipt

**02** / **16** / **2016**

**Transaction ID : C7071865**

Amount of Each Receipt this Period

3607.57

☐ Memo Item

Transfer

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

10443.95

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 90  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

## **A. Workers United for Political Power Campaign Comm.**

Mailing Address 31 WEST 15TH STREET 3RD FLOOR  
POLITICAL DEPARTMENT

City State Zip Code  
NEW YORK NY 10011

FEC ID number of contributing  
federal political committee.

**C** C00462044

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

43192.96

Date of Receipt

**02** / **16** / **2016**

**Transaction ID : C7071866**

Amount of Each Receipt this Period

184.58

☐ Memo Item

Transfer

Full Name (Last, First, Middle Initial)

## **B. Workers United for Political Power Campaign Comm.**

Mailing Address 31 WEST 15TH STREET 3RD FLOOR  
POLITICAL DEPARTMENT

City State Zip Code  
NEW YORK NY 10011

FEC ID number of contributing  
federal political committee.

**C** C00462044

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

43192.96

Date of Receipt

**02** / **16** / **2016**

**Transaction ID : C7071867**

Amount of Each Receipt this Period

3615.15

☐ Memo Item

Transfer

Full Name (Last, First, Middle Initial)

## **C. Workers United for Political Power Campaign Comm.**

Mailing Address 31 WEST 15TH STREET 3RD FLOOR  
POLITICAL DEPARTMENT

City State Zip Code  
NEW YORK NY 10011

FEC ID number of contributing  
federal political committee.

**C** C00462044

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

43192.96

Date of Receipt

**02** / **16** / **2016**

**Transaction ID : C7071868**

Amount of Each Receipt this Period

810.20

☐ Memo Item

Transfer

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

4609.93

22033.28

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 90

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. AL Media, LLC**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				1	1		2	0	1	6		

Mailing Address 222 W. Ontario St.  
Suite 600

City Chicago    State IL    Zip Code 60654

Purpose of Disbursement  
Communications Consulting Services

Candidate Name

Category/  
Type**Transaction ID : D363231**

Amount of Each Disbursement this Period

7500.00

☐ Memo ItemOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Full Name (Last, First, Middle Initial)

**B. AL Media, LLC**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				1	1		2	0	1	6		

Mailing Address 222 W. Ontario St.  
Suite 600

City Chicago    State IL    Zip Code 60654

Purpose of Disbursement  
Communications Consulting Services

Candidate Name

Category/  
Type**Transaction ID : D363232**

Amount of Each Disbursement this Period

22500.00

☐ Memo ItemOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Full Name (Last, First, Middle Initial)

**C. Ardleigh Group**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				1	1		2	0	1	6		

Mailing Address PO Box 12182

City Washington    State DC    Zip Code 20006

Purpose of Disbursement  
Field Organization Services

Candidate Name

Category/  
Type**Transaction ID : D363235**

Amount of Each Disbursement this Period

20660.01

☐ Memo ItemOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►

50660.01

**TOTAL** This Period (last page this line number only)..... ►

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

SEIU COPE (Service Employees International Union Committee On Political Education)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 90

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. Brilliant Corners Research & Strategies**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	8			2	0	1	6		

Mailing Address 1250 Eye St NW  
Ste 200

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Research Consulting Services

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID : D363274**

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Brilliant Corners Research & Strategies**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	5			2	0	1	6		

Mailing Address 1250 Eye St NW  
Ste 200

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Research Consulting Services

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID : D363817**

Amount of Each Disbursement this Period

5137.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Brilliant Corners Research & Strategies**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	5			2	0	1	6		

Mailing Address 1250 Eye St NW  
Ste 200

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Research Consulting Services

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID : D363818**

Amount of Each Disbursement this Period

10000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25137.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 90

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. Care2.com Inc**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	1	6		

Mailing Address 275 Shoreline Dr  
#300

City Redwood City State CA Zip Code 94065

Purpose of Disbursement  
Issue Advocacy Consulting Services

Candidate Name

Category/  
Type**Transaction ID : D363228**

Amount of Each Disbursement this Period

5000.00

☐ Memo ItemOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Civix Strategy Group**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	1	6		

Mailing Address 114 North Main Street  
Ste 203

City Concord State NH Zip Code 03301

Purpose of Disbursement  
Issue Advocacy Consulting Services

Candidate Name

Category/  
Type**Transaction ID : D363223**

Amount of Each Disbursement this Period

103319.00

☐ Memo ItemOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Civix Strategy Group**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	1	6		

Mailing Address 114 North Main Street  
Ste 203

City Concord State NH Zip Code 03301

Purpose of Disbursement  
Issue Advocacy Consulting Services

Candidate Name

Category/  
Type**Transaction ID : D363224**

Amount of Each Disbursement this Period

9673.25

☐ Memo ItemOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

117992.25



<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

SEIU COPE (Service Employees International Union Committee On Political Education)

Category/  
Type

 Memo Item

Category/  
Type

 Memo Item

Three digital displays are shown, each with a row of small squares above the main display area. The first display shows '02' with two squares above it. The second display shows '05' with two squares above it. The third display shows '2016' with four squares above it.

Category/  
Type

 Memo Item

16707.14

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

SEIU COPE (Service Employees International Union Committee On Political Education)

1450.31

 Memo Item

MM / DD / YYYY

3350.00

 Memo Item



 Memo Item

52000.31

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 90

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. Greenberg Quinlin Rosner Research Inc**

Date of Disbursement

Mailing Address 10 G St NE ste 400

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				1	1		2	0	1	6		

City Washington      State DC      Zip Code 20002

**Transaction ID : D363227**Purpose of Disbursement  
Research Consulting Services

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

17000.00

☐ Memo Item
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Full Name (Last, First, Middle Initial)

**B. M&R Strategic Services**

Date of Disbursement

Mailing Address 1901 L St NW  
Ste 800

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				1	8		2	0	1	6		

City Washington      State DC      Zip Code 20036

**Transaction ID : D363273**Purpose of Disbursement  
Communications Consulting Services

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

19745.00

☐ Memo Item
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Full Name (Last, First, Middle Initial)

**C. Prospero Consulting BDA Equancy Consulting LLC**

Date of Disbursement

Mailing Address 130 West 17th Street  
Ste 6S

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	6		2	0	1	6		

City New York      State NY      Zip Code 10011

**Transaction ID : D363821**Purpose of Disbursement  
Research Consulting Services

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1114.15

☐ Memo Item
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►

37859.15

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 90

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. Prospero Consulting BDA Equancy Consulting LLC**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	6		2	0	1	6		

Mailing Address 130 West 17th Street  
Ste 6S

City New York    State NY    Zip Code 10011

Purpose of Disbursement  
Research Consulting Services

Candidate Name

Category/  
Type**Transaction ID : D363822**

Amount of Each Disbursement this Period

52885.85

☐ Memo ItemOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Full Name (Last, First, Middle Initial)

**B. Terra Strategies, LLC**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				0	5		2	0	1	6		

Mailing Address 100 East Grand Ave. Suite 380

City Des Moines    State IA    Zip Code 50309

Purpose of Disbursement  
Field Organization Services

Candidate Name

Category/  
Type**Transaction ID : D363215**

Amount of Each Disbursement this Period

68595.00

☐ Memo ItemOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Full Name (Last, First, Middle Initial)

**C. Terra Strategies, LLC**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				0	5		2	0	1	6		

Mailing Address 100 East Grand Ave. Suite 380

City Des Moines    State IA    Zip Code 50309

Purpose of Disbursement  
Field Organization Services

Candidate Name

Category/  
Type**Transaction ID : D363216**

Amount of Each Disbursement this Period

27500.00

☐ Memo ItemOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

148980.85

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 90

☒ 21b   ☐ 22   ☐ 23   ☐ 24   ☐ 25   ☐ 26  
☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. The Pivot Group**

Mailing Address 1720 I Street, NW Suite 550

City Washington      State DC      Zip Code 20006

Purpose of Disbursement  
Photography for Member to Member Literature

Candidate Name

Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

State:      District:

Disbursement For:  
☐ Primary      ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02      11      2016
**Transaction ID : D363230**

Amount of Each Disbursement this Period

5473.26

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. The Pivot Group**

Mailing Address 1720 I Street, NW Suite 550

City Washington      State DC      Zip Code 20006

Purpose of Disbursement  
Issue Advocacy Literature

Candidate Name

Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

State:      District:

Disbursement For:  
☐ Primary      ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02      18      2016
**Transaction ID : D363275**

Amount of Each Disbursement this Period

7960.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City      State      Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

State:      District:

Disbursement For:  
☐ Primary      ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

13433.26

863867.97

<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input checked="" type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

SEIU COPE (Service Employees International Union Committee On Political Education)

## A. ALMA ADAMS FOR CONGRESS

Three 7-segment displays are shown, each with a label above it. The first display is labeled 'M M' and shows the number '02'. The second display is labeled 'D D' and shows the number '11'. The third display is labeled 'Y Y Y Y' and shows the year '2016'. The displays are separated by slashes.

2500.00

Category/  
Type

 Memo Item

**B. CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE**

2000.00

Category/  
Type

Disbursement For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

### C. DR. RAUL RUIZ FOR CONGRESS

-5000.00

Category/  
Type

Disbursement For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional).....

-500.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 90

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. DR. RAUL RUIZ FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2016

Mailing Address PO BOX 6116

City	State	Zip Code
La Quinta	CA	92248

**Transaction ID : D363813**Purpose of Disbursement  
Contribution

Amount of Each Disbursement this Period

Candidate Name

**DR. RAUL RUIZ**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: CA District: 36

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HOYER FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2016

Mailing Address 700 13TH STREET NW  
SUITE 600

City	State	Zip Code
WASHINGTON	DC	20005

**Transaction ID : D363270**Purpose of Disbursement  
Contribution

Amount of Each Disbursement this Period

Candidate Name

**Steny Hoyer**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MD District: 05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MARC VEASEY CONGRESSIONAL CAMPAIGN COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2016

Mailing Address PO BOX 50084

City	State	Zip Code
FORT WORTH	TX	76105

**Transaction ID : D363219**Purpose of Disbursement  
Contribution

Amount of Each Disbursement this Period

Candidate Name

**MARC ALLISON VEASEY**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: TX District: 33

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 90

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. Washington State Democratic Central Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2016

Mailing Address P O Box 4027

City	State	Zip Code
Seattle	WA	98194

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

**Transaction ID : D363811**

Amount of Each Disbursement this Period

5000.00
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Amount of Each Disbursement this Period

--

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Amount of Each Disbursement this Period

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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5000.00
---------

19500.00
----------



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 90

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. Citizen Action for Political Education**

Mailing Address 805 SW Broadway, Ste. 2700

City	State	Zip Code
Portland	OR	97205

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2016

**Transaction ID : D363814**

Amount of Each Disbursement this Period

85661.54
----------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SEIU Florida State Council**Mailing Address 14645 NW 77th Ave  
Suite 201

City	State	Zip Code
Hialeah	FL	33014

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2016

**Transaction ID : D363278**

Amount of Each Disbursement this Period

53500.00
----------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SEIU Local 221 Independent Expenditure PAC**

Mailing Address 420 Montgomery St.

City	State	Zip Code
San Francisco	CA	94104

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	11	/	2016

**Transaction ID : D363234**

Amount of Each Disbursement this Period

39127.47
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

178289.01
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 26 OF 90

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. SEIU Local 73 Bipartisan PAC**

Mailing Address 300 S Ashland Ave

City	State	Zip Code
Chicago	IL	60607

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2016

**Transaction ID : D363233**

Amount of Each Disbursement this Period

79025.91
----------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. State Employees Association of NH Inc**

Mailing Address 207 N Main St

City	State	Zip Code
Concord	NH	03301

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2016

**Transaction ID : D363237**

Amount of Each Disbursement this Period

935.83
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

79961.74
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258250.75
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**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**1199 SEIU UHE**

Nature of Debt (Purpose):

Direct Mail Postage

Mailing Address 310 West 43rd Street

City State

New York

Zip Code

NY

10036

Outstanding Balance Beginning This Period

4688.18

Transaction ID : D318325

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4688.18

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**AL Media, LLC**

Nature of Debt (Purpose):

TV Advertising Production &amp; Digital Advertising Buy

Mailing Address 222 W. Ontario St.

Suite 600

City State

Chicago

Zip Code

IL

60654

Outstanding Balance Beginning This Period

6750.00

Transaction ID : D299807

Amount Incurred This Period

165650.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

172400.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Ardleigh Group**

Nature of Debt (Purpose):

Canvassing Services

Mailing Address PO Box 12182

City

Washington

State

DC

Zip Code

20006

Outstanding Balance Beginning This Period

0.00

Transaction ID : D364145

Amount Incurred This Period

90593.02

Payment This Period

0.00

Outstanding Balance at Close of This Period

90593.02

1) **SUBTOTALS** This Period This Page (optional)..... ►

267681.20

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 28 OF 90

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ASJ Media LLC**

Nature of Debt (Purpose):

Newspaper Advertising

Mailing Address 1210 S. Brand Blvd.

City State

Zip Code

Glendale

CA

91204

Outstanding Balance Beginning This Period

0.00

Transaction ID : D364146

Amount Incurred This Period

2000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Beaconfire RedEngine**

Nature of Debt (Purpose):

Digital Advertising

Mailing Address 2300 Clarendon Blvd, Suite 925

City State

Zip Code

Arlington

VA

22201

Outstanding Balance Beginning This Period

12306.25

Transaction ID : D362271

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

12306.25

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Berlin Rosen**

Nature of Debt (Purpose):

Radio Advertising Production

Mailing Address 15 Maiden Lane #1600

City

State

Zip Code

New York

NY

10038

Outstanding Balance Beginning This Period

2800.00

Transaction ID : D309812

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2800.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

17106.25

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 29 OF 90

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Cardenas Strategy Group**

Nature of Debt (Purpose):

TV &amp; Radio Advertising Production

Mailing Address 556 S. Fair Oaks Ave. #158

City State

Zip Code

Pasadena

CA

91105

Outstanding Balance Beginning This Period

0.00

Transaction ID : D364158

Amount Incurred This Period

2817.92

Payment This Period

0.00

Outstanding Balance at Close of This Period

2817.92

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Chambers Lopez Strategies**

Nature of Debt (Purpose):

Online Advertising Buy, TV & Radio Ad  
Production

Mailing Address PO Box 5539

City State

Zip Code

Arlington

VA

22205

Outstanding Balance Beginning This Period

36350.00

Transaction ID : D287106

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

36350.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**El Mundo Newspaper**

Nature of Debt (Purpose):

Newspaper Advertising

Mailing Address 760 N. Eastern Ave. #110

City

State

Zip Code

Las Vegas

NV

89101

Outstanding Balance Beginning This Period

0.00

Transaction ID : D364147

Amount Incurred This Period

3500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3500.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

42667.92

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 30 OF 90

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Elevation, Ltd.**Nature of Debt (Purpose):  
Online Advertising BuyMailing Address 1027 33rd Street, NW  
Suite 260City State Zip Code  
Washington DC 20007

Outstanding Balance Beginning This Period

100040.00

Transaction ID : D289787

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

100040.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Facebook Advertising**Nature of Debt (Purpose):  
Digital Advertising

Mailing Address 15161 Collection Center Dr

City State Zip Code  
Chicago IL 60693

Outstanding Balance Beginning This Period

11094.00

Transaction ID : D362847

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11094.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Google**Nature of Debt (Purpose):  
Online Advertising Buy

Mailing Address 1600 Ampitheatre Parkway

City State Zip Code  
Mountain View CA 94043

Outstanding Balance Beginning This Period

11528.38

Transaction ID : D287115

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11528.38

1) **SUBTOTALS** This Period This Page (optional)..... ►

122662.38

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 31 OF 90

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**GPS Impact**Nature of Debt (Purpose):  
Digital AdvertisingMailing Address 100 E Grand Ave.  
Suite 380City State Zip Code  
Des Moines IA 50309

Outstanding Balance Beginning This Period

6635.00

Transaction ID : D363246

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6635.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**iAmerica Action**Nature of Debt (Purpose):  
Canvassing Services

Mailing Address 1800 Massachusetts Ave., NW

City State Zip Code  
Washington DC 20036

Outstanding Balance Beginning This Period

0.00

Transaction ID : D364148

Amount Incurred This Period

2638.68

Payment This Period

0.00

Outstanding Balance at Close of This Period

2638.68

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Image Pointe**Nature of Debt (Purpose):  
T-Shirts, Skullies & Stickers

Mailing Address 1224 La Porte Road

City State Zip Code  
Waterloo IA 50702

Outstanding Balance Beginning This Period

66506.36

Transaction ID : D304068

Amount Incurred This Period

31611.34

Payment This Period

0.00

Outstanding Balance at Close of This Period

98117.70

1) **SUBTOTALS** This Period This Page (optional)..... ►

107391.38

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 32 OF 90

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Mack/Crounse Group LLC**Nature of Debt (Purpose):  
Voter Canvass Literature

Mailing Address 4900 Seminary Road Suite 1020

City State

Zip Code

Alexandria

VA

22311

Outstanding Balance Beginning This Period

4533.86

**Transaction ID : D299810**

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4533.86

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Mass Uniting**

Nature of Debt (Purpose):

Canvassing Services from 3/26-4/30 &amp; 5/13-6/25

Mailing Address 150 Mt. Vernon St., 2nd Floor

City State

Zip Code

Boston

MA

02125

Outstanding Balance Beginning This Period

33100.00

**Transaction ID : D312556**

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

33100.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Mele Printing**

Nature of Debt (Purpose):

Estimated Cost for Canvass Literature Printing

Mailing Address 619 N. Tyler Street

City

State

Zip Code

Covington

LA

70433

Outstanding Balance Beginning This Period

3800.00

**Transaction ID : D352706**

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3800.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

41433.86

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►



**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 33 OF 90

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Mission Control Inc**Nature of Debt (Purpose):  
Voter Canvass Literature

Mailing Address 114A Mansfield Hollow Road

City State

Zip Code

Mansfield Center

CT

06250

Outstanding Balance Beginning This Period

1776.40

Transaction ID : D297651

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1776.40

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Murphy Vogel Askew Reilly LLC**

Nature of Debt (Purpose):

TV &amp; Radio Advertising Production

Mailing Address 901 North Washington Street

Suite 400

City State

Zip Code

Alexandria

VA

22314-1535

Outstanding Balance Beginning This Period

1593.75

Transaction ID : D299791

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1593.75

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**NG Slater Corp**

Nature of Debt (Purpose):

Buttons

Mailing Address 42 W 38th St

Ste 1002

City

State

Zip Code

New York

NY

10018

Outstanding Balance Beginning This Period

18.75

Transaction ID : D363250

Amount Incurred This Period

520.55

Payment This Period

18.75

Outstanding Balance at Close of This Period

520.55

1) **SUBTOTALS** This Period This Page (optional)..... ►

3890.70

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 34 OF 90

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**NGP VAN, Inc.**

Nature of Debt (Purpose):

Voter Outreach Telephone Calls

Mailing Address 48 Grove Street, Suite 202

City State

Zip Code

Somerville

MA

02144

Outstanding Balance Beginning This Period

1500.00

Transaction ID : D304071

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Pearson Community Center**

Nature of Debt (Purpose):

Room Rental

Mailing Address 1625 N. Carey Ave.

City State

Zip Code

North Las Vegas

NV

89032

Outstanding Balance Beginning This Period

0.00

Transaction ID : D364149

Amount Incurred This Period

180.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

180.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Philippine News Las Vegas**

Nature of Debt (Purpose):

Newspaper Advertising

Mailing Address 1308 Bayshore Hwy  
Suite 120City  
BurlingameState  
CAZip Code  
94010

Outstanding Balance Beginning This Period

0.00

Transaction ID : D364150

Amount Incurred This Period

1000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

2680.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 35 OF 90

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Pitney Bowes**

Nature of Debt (Purpose):

Direct Mail Postage

Mailing Address 1 Elmcroft Road

City State

Zip Code

Stamford

CT

06926

Outstanding Balance Beginning This Period

205.69

Transaction ID : D348408

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

205.69

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Revolution Media Enterprises Inc**

Nature of Debt (Purpose):

TV &amp; Radio Advertising Production

Mailing Address 1306 Pennsylvania Ave Ave SE

Ste 101

City State

Zip Code

Washington

DC

20003

Outstanding Balance Beginning This Period

0.00

Transaction ID : D364164

Amount Incurred This Period

4425.55

Payment This Period

0.00

Outstanding Balance at Close of This Period

4425.55

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Rising Tide Interactive LLC**

Nature of Debt (Purpose):

Digital Advertising Production

Mailing Address 1250 H Street, NW

Suite 400

City

State

Zip Code

Washington

DC

20015

Outstanding Balance Beginning This Period

3720.00

Transaction ID : D362848

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3720.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

8351.24

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**SEIU General Fund**

Nature of Debt (Purpose):

Est. Payment for Salary & Benefits/Canvassing  
Services/Posters

Mailing Address 1800 Massachusetts Ave NW

City State

Zip Code

Washington

DC

20036

Outstanding Balance Beginning This Period

14849.75

Transaction ID : D274285

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

14849.75

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**SEIU General Fund**

Nature of Debt (Purpose):

Stickers, Rally Signs

Mailing Address 1800 Massachusetts Ave NW

City State

Zip Code

Washington

DC

20036

Outstanding Balance Beginning This Period

903.00

Transaction ID : D363249

Amount Incurred This Period

1014.28

Payment This Period

0.00

Outstanding Balance at Close of This Period

1917.28

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**SEIU Local 105**

Nature of Debt (Purpose):

Estimate for Rally Expenses

Mailing Address 2525 W Alameda Ave  
2nd Fl

City

State

Zip Code

Denver

CO

80219

Outstanding Balance Beginning This Period

5423.18

Transaction ID : D344307

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5423.18

1) **SUBTOTALS** This Period This Page (optional)..... ►

22190.21

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 37 OF 90

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**SEIU Local 1989 - Maine State Emp Assoc**Nature of Debt (Purpose):  
Voter Outreach CallsMailing Address 65 State Street  
P O Box 1072City State Zip Code  
Augusta ME 04332

Outstanding Balance Beginning This Period

5000.00

Transaction ID : D313877

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**SEIU Local 521**Nature of Debt (Purpose):  
Estimate for Rally Expenses

Mailing Address 4100 Empire Drive Suite 150

City State Zip Code  
Bakersfield CA 93309

Outstanding Balance Beginning This Period

370.00

Transaction ID : D344308

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

370.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**SEIU MA State Council**Nature of Debt (Purpose):  
Direct Mail PrintingMailing Address 145 Tremont Street  
Suite 202City State Zip Code  
Boston MA 02111

Outstanding Balance Beginning This Period

2975.33

Transaction ID : D318326

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2975.33

1) **SUBTOTALS** This Period This Page (optional)..... ►

8345.33

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 38 OF 90

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Spotset Radio Network**

Nature of Debt (Purpose):

Radio Advertising Production

Mailing Address 44 N. Second Street  
Suite 800City State Zip Code  
Memphis TN 38103

Outstanding Balance Beginning This Period

2100.00

Transaction ID : D304146

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2100.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Standard Modern Company**

Nature of Debt (Purpose):

Direct Mail

Mailing Address 47 Pleasant Street

City State Zip Code  
Brockton MA 02301

Outstanding Balance Beginning This Period

114.35

Transaction ID : D348409

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

114.35

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Stones' Phones**

Nature of Debt (Purpose):

Voter Outreach Calls

Mailing Address 41-750 Rancho Las Palmas Drive

City State Zip Code  
Rancho Mirage CA 92270

Outstanding Balance Beginning This Period

8019.75

Transaction ID : D363248

Amount Incurred This Period

0.00

Payment This Period

6976.22

Outstanding Balance at Close of This Period

1043.53

1) **SUBTOTALS** This Period This Page (optional)..... ►

3257.88

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 39 OF 90

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Terra Strategies, LLC**Nature of Debt (Purpose):  
Canvassing Services

Mailing Address 100 East Grand Ave. Suite 380

City State

Zip Code

Des Moines

IA

50309

Outstanding Balance Beginning This Period

0.00

**Transaction ID : D364116**

Amount Incurred This Period

300631.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

300631.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**The Pivot Group**Nature of Debt (Purpose):  
Direct Mail & Newspaper Advertising Design

Mailing Address 1720 I Street, NW Suite 550

City State

Zip Code

Washington

DC

20006

Outstanding Balance Beginning This Period

9085.26

**Transaction ID : D363247**

Amount Incurred This Period

26982.26

Payment This Period

9085.26

Outstanding Balance at Close of This Period

26982.26

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Waterfront Strategies**Nature of Debt (Purpose):  
TV & Radio Advertising Production/BuysMailing Address 1010 Wisconsin Avenue, NW  
Suite 800

City

State

Zip Code

Washington

DC

20007

Outstanding Balance Beginning This Period

15037.22

**Transaction ID : D297653**

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15037.22

1) **SUBTOTALS** This Period This Page (optional)..... ►

342650.48

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 40 OF 90

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Wisconsin Jobs Now**

Nature of Debt (Purpose):

Radio Advertising Buy

Mailing Address PO BOX 511506

City State

Zip Code

Milwaukee

WI

53203

Outstanding Balance Beginning This Period

9075.00

Transaction ID : D304072

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9075.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

9075.00

2) **TOTALS** This Period (last page this line number only)..... ►

999383.83

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

999383.83



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 41 OF 90  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span>				
Full Name of Payee <b>Image Pointe</b>			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 1224 La Porte Road			Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> 02 / 01 / 2016	
City Waterloo		State IA	Zip Code 50702	Amount <span style="border:1px solid black; padding:2px;">632.28</span>
Purpose of Expenditure Estimated Cost: T-shirts		Category/ Type <span style="border:1px solid black; padding:2px;">006</span>		Transaction ID : D364130 Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> 02 / 01 / 2016
Name of Federal Candidate HILLARY RODHAM CLINTON			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate			District: _____ State: MA	
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">4941.93</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>The Pivot Group</b>			<input type="checkbox"/> Memo Item	
Mailing Address 1720 I Street, NW Suite 550			Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> 02 / 06 / 2016	
City Washington		State DC	Zip Code 20006	Amount <span style="border:1px solid black; padding:2px;">5940.00</span>
Purpose of Expenditure Voter Canvass Literature		Category/ Type <span style="border:1px solid black; padding:2px;">006</span>		Transaction ID : D363100 Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> 02 / 02 / 2016
Name of Federal Candidate HILLARY RODHAM CLINTON			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate			District: _____ State: NV	
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">457842.38</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			<span style="border:1px solid black; padding:2px;">5940.00</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶			<span style="border:1px solid black; padding:2px;"></span>	
(c) TOTAL Independent Expenditures.....▶			<span style="border:1px solid black; padding:2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature  <i>Michael P. Fishman</i>			Date <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> 03 / 20 / 2016	
[Electronically Filed]				

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 42 OF 90  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>		

Full Name of Payee <b>Image Pointe</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">02</span> / <span style="border: 1px solid black; padding: 2px;">02</span> / <span style="border: 1px solid black; padding: 2px;">2016</span>
Mailing Address 1224 La Porte Road			Amount <span style="border: 1px solid black; padding: 2px;">627.00</span>
City Waterloo	State IA	Zip Code 50702	<b>Transaction ID : D364131</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">02</span> / <span style="border: 1px solid black; padding: 2px;">02</span> / <span style="border: 1px solid black; padding: 2px;">2016</span>
Purpose of Expenditure Estimated Cost: Skullies		Category/ Type <span style="border: 1px solid black; padding: 2px;">006</span>	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CT</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2103.50</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Image Pointe</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">02</span> / <span style="border: 1px solid black; padding: 2px;">02</span> / <span style="border: 1px solid black; padding: 2px;">2016</span>
Mailing Address 1224 La Porte Road			Amount <span style="border: 1px solid black; padding: 2px;">1476.50</span>
City Waterloo	State IA	Zip Code 50702	<b>Transaction ID : D364132</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">02</span> / <span style="border: 1px solid black; padding: 2px;">02</span> / <span style="border: 1px solid black; padding: 2px;">2016</span>
Purpose of Expenditure Estimated Cost: T-shirts		Category/ Type <span style="border: 1px solid black; padding: 2px;">006</span>	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CT</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2103.50</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Date

03 / 20 / 2016

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 43 OF 90  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span>				
Full Name of Payee <b>Image Pointe</b>			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 1224 La Porte Road			Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">02</span> / <span style="border:1px solid black; padding:2px;">03</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
City Waterloo		State IA	Zip Code 50702	Amount <span style="border:1px solid black; padding:2px;">332.28</span>
Purpose of Expenditure Estimated Cost: T-shirts		Category/ Type <span style="border:1px solid black; padding:2px;">006</span>		Transaction ID : <b>D364133</b> Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">02</span> / <span style="border:1px solid black; padding:2px;">03</span> / <span style="border:1px solid black; padding:2px;">2016</span>
Name of Federal Candidate HILLARY RODHAM CLINTON			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate			District: _____ State: <b>MA</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">4941.93</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>Image Pointe</b>			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 1224 La Porte Road			Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">02</span> / <span style="border:1px solid black; padding:2px;">03</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
City Waterloo		State IA	Zip Code 50702	Amount <span style="border:1px solid black; padding:2px;">1226.60</span>
Purpose of Expenditure Estimated Cost: T-shirts		Category/ Type <span style="border:1px solid black; padding:2px;">006</span>		Transaction ID : <b>D364134</b> Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">02</span> / <span style="border:1px solid black; padding:2px;">03</span> / <span style="border:1px solid black; padding:2px;">2016</span>
Name of Federal Candidate HILLARY RODHAM CLINTON			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate			District: _____ State: <b>TX</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">99730.27</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<span style="border:1px solid black; padding:2px;">0.00</span>	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<span style="border:1px solid black; padding:2px;"></span>	
(c) <b>TOTAL</b> Independent Expenditures..... ▶			<span style="border:1px solid black; padding:2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature  <i>Michael P. Fishman</i>			Date <span style="border:1px solid black; padding:2px;">03</span> / <span style="border:1px solid black; padding:2px;">20</span> / <span style="border:1px solid black; padding:2px;">2016</span> <i>[Electronically Filed]</i>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 44 OF 90  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;">C C00004036</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>				
Full Name of Payee <b>Image Pointe</b>			<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 02 / 03 / 2016	
Mailing Address 1224 La Porte Road			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 339.77	
City Waterloo		State IA	Zip Code 50702	
Purpose of Expenditure Estimated Cost: T-shirts		Category/ Type <div style="border: 1px solid black; padding: 2px;">006</div>		Transaction ID : <b>D364135</b> Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 02 / 03 / 2016
Name of Federal Candidate HILLARY RODHAM CLINTON			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>MA</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>Organize Now Inc</b>			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 02 / 15 / 2016	
Mailing Address 134 E Colonial Dr			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 66666.66	
City Orlando		State FL	Zip Code 32801	
Purpose of Expenditure Canvassing Services		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>		Transaction ID : <b>D363183</b> Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 02 / 04 / 2016
Name of Federal Candidate DONALD J TRUMP			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>FL</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 66666.66	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div>	
(c) <b>TOTAL</b> Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature  <i>Michael P. Fishman</i>			Date <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 03 / 20 / 2016	

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 45 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		

Full Name of Payee <b>Organize Now Inc</b>		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>02 / 15 / 2016</b>	
Mailing Address 134 E Colonial Dr			Amount <span style="border: 1px solid black; padding: 2px;">66666.67</span>	
City Orlando	State FL	Zip Code 32801	Transaction ID : <b>D363184</b>	
Purpose of Expenditure Canvassing Services		Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>02 / 04 / 2016</b>	
Name of Federal Candidate MARCO RUBIO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>	
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">211284.31</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Organize Now Inc</b>		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>02 / 15 / 2016</b>	
Mailing Address 134 E Colonial Dr			Amount <span style="border: 1px solid black; padding: 2px;">66666.67</span>	
City Orlando	State FL	Zip Code 32801	Transaction ID : <b>D363185</b>	
Purpose of Expenditure Canvassing Services		Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>02 / 04 / 2016</b>	
Name of Federal Candidate RAFAEL EDWARD TED CRUZ		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>	
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">211284.31</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">133333.34</span>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) TOTAL Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
**03 / 20 / 2016**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 46 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span>					
Full Name of Payee <b>NG Slater Corp</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> <b>02 / 18 / 2016</b>		
Mailing Address 42 W 38th St Ste 1002			Amount <span style="border: 1px solid black; padding: 2px;">138.85</span>		
City New York		State NY	Zip Code 10018		Transaction ID : <b>D363257</b>
Purpose of Expenditure Buttons		Category/Type <span style="border: 1px solid black; padding: 2px;">006</span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> <b>02 / 04 / 2016</b>	
Name of Federal Candidate HILLARY RODHAM CLINTON			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NV</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">457842.38</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Stones' Phones</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> <b>01 / 28 / 2016</b>		
Mailing Address 41-750 Rancho Las Palmas Drive			Amount <span style="border: 1px solid black; padding: 2px;">595.42</span>		
City Rancho Mirage		State CA	Zip Code 92270		Transaction ID : <b>D364113</b>
Purpose of Expenditure Payment for Voter Outreach Calls as Disclosed on 1/30 24-Hr & 2/20 Monthly Reports		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> <b>02 / 04 / 2016</b>	
Name of Federal Candidate HILLARY RODHAM CLINTON			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>IA</b>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">39324.27</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<span style="border: 1px solid black; padding: 2px;">734.27</span>		
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) <b>TOTAL</b> Independent Expenditures..... ▶			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Michael P. Fishman</u>			Date <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> <b>03 / 20 / 2016</b>		

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 47 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00004036       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>				
Full Name of Payee <input type="checkbox"/> Memo Item <b>Stones' Phones</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  01 / 30 / 2016 </div>	
Mailing Address 41-750 Rancho Las Palmas Drive			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">6380.80</div>	
City State Zip Code Rancho Mirage CA 92270		<b>Transaction ID : D364114</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 04 / 2016 </div>		
Purpose of Expenditure Actual Cost for Voter Outreach Calls as Disclosed on 1/30 24-Hr & 2/20 Monthly Reports		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose HILLARY RODHAM CLINTON			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>IA</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">39324.27</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Image Pointe</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 10 / 2016 </div>	
Mailing Address 1224 La Porte Road			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">193.50</div>	
City State Zip Code Waterloo IA 50702		<b>Transaction ID : D363147</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 06 / 2016 </div>		
Purpose of Expenditure Estimated Cost: Skullies		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div>		
Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose HILLARY RODHAM CLINTON			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>FL</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">211284.31</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;">6380.80</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
<b>(c) TOTAL</b> Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Michael P. Fishman</u>			Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  03 / 20 / 2016 </div>	

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 48 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		

Full Name of Payee <b>Ardleigh Group</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 06 / 2016	
Mailing Address PO Box 12182		Amount <span style="border: 1px solid black; padding: 2px;">90593.02</span>		
City Washington	State DC	Zip Code 20006	Transaction ID : <b>D363740</b>	
Purpose of Expenditure Canvassing Services	Category/Type 001	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 06 / 2016		
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">457842.38</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <b>Image Pointe</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 06 / 2016	
Mailing Address 1224 La Porte Road		Amount <span style="border: 1px solid black; padding: 2px;">281.90</span>		
City Waterloo	State IA	Zip Code 50702	Transaction ID : <b>D364136</b>	
Purpose of Expenditure Estimated Cost: Skullies	Category/Type 006	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 06 / 2016		
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>DC</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4342.96</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2016

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 49 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Terra Strategies, LLC</b>		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 08 / 2016</b>
Mailing Address 100 East Grand Ave. Suite 380			Amount 249000.00
City Des Moines	State IA	Zip Code 50309	Transaction ID : D363115
Purpose of Expenditure Canvassing Services	Category/Type 001		Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 08 / 2016</b>
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC
Calendar Year-To-Date Per Election for Office Sought		729056.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>The Pivot Group</b>		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 08 / 2016</b>
Mailing Address 1720 I Street, NW Suite 550			Amount 14775.00
City Washington	State DC	Zip Code 20006	Transaction ID : D363116
Purpose of Expenditure Voter Canvass Literature	Category/Type 006		Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 08 / 2016</b>
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC
Calendar Year-To-Date Per Election for Office Sought		729056.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	263775.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Date

MM / DD / YYYY  
**03 / 20 / 2016**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 50 OF 90  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00004036</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>			
Full Name of Payee <b>Terra Strategies, LLC</b>		<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 300631.00	
Mailing Address 100 East Grand Ave. Suite 380		<b>Transaction ID : D364115</b> Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
City State Zip Code Des Moines IA 50309			
Purpose of Expenditure Portion of Canvassing Services Disclosed on 2/9 24-Hr Rpt. Not Yet Paid		Category/Type <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 001	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: SC	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 729056.00			
Full Name of Payee <b>Image Pointe</b>		<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 112.92	
Mailing Address 1224 La Porte Road		<b>Transaction ID : D364137</b> Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
City State Zip Code Waterloo IA 50702			
Purpose of Expenditure Estimated Cost: T-shirts		Category/Type <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 006	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: MI	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 764.29			
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 0.00	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div>	
(c) <b>TOTAL</b> Independent Expenditures..... ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  <i>Michael P. Fishman</i>		Date <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 03 / 20 / 2016	
[Electronically Filed]			

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 51 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		

Full Name of Payee <b>Image Pointe</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>02 / 08 / 2016</b>	
Mailing Address <b>1224 La Porte Road</b>		Amount <span style="border: 1px solid black; padding: 2px;">627.16</span>		
City <b>Waterloo</b>	State <b>IA</b>	Zip Code <b>50702</b>	Transaction ID : <b>D364138</b>	
Purpose of Expenditure Estimated Cost: T-shirts		Category/Type <span style="border: 1px solid black; padding: 2px;">006</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>02 / 08 / 2016</b>	
Name of Federal Candidate <b>HILLARY RODHAM CLINTON</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>MN</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2852.64</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <b>Image Pointe</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>02 / 10 / 2016</b>	
Mailing Address <b>1224 La Porte Road</b>		Amount <span style="border: 1px solid black; padding: 2px;">4064.71</span>		
City <b>Waterloo</b>	State <b>IA</b>	Zip Code <b>50702</b>	Transaction ID : <b>D363144</b>	
Purpose of Expenditure Estimated Cost: T-shirts		Category/Type <span style="border: 1px solid black; padding: 2px;">006</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>02 / 09 / 2016</b>	
Name of Federal Candidate <b>HILLARY RODHAM CLINTON</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">211284.31</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y  
**03 / 20 / 2016**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 52 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>SEIU General Fund</b>		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 09 / 2016</b>	
Mailing Address 1800 Massachusetts Ave NW				Amount 150.00	
City Washington	State DC	Zip Code 20036		Transaction ID : D363153	
Purpose of Expenditure Flyers		Category/Type 006		Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 09 / 2016</b>	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought		457842.38		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>SEIU General Fund</b>		<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 11 / 2016</b>	
Mailing Address 1800 Massachusetts Ave NW				Amount 193.72	
City Washington	State DC	Zip Code 20036		Transaction ID : D363155	
Purpose of Expenditure Estimated Cost: Rally Signs		Category/Type 006		Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 09 / 2016</b>	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought		457842.38		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	150.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Date

MM / DD / YYYY  
**03 / 20 / 2016**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 53 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00004036       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>The Pivot Group</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 15 / 2016 </div>	
Mailing Address 1720 I Street, NW Suite 550		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 12958.15 </div>	
City Washington	State DC	Zip Code 20006	<b>Transaction ID : D363178</b>
Purpose of Expenditure Direct Mail	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 09 / 2016 </div>
Name of Federal Candidate HILLARY RODHAM CLINTON		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 457842.38 </div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>The Pivot Group</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 16 / 2016 </div>	
Mailing Address 1720 I Street, NW Suite 550		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 12958.15 </div>	
City Washington	State DC	Zip Code 20006	<b>Transaction ID : D363192</b>
Purpose of Expenditure Direct Mail	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 09 / 2016 </div>
Name of Federal Candidate HILLARY RODHAM CLINTON		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 457842.38 </div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Date

MM / DD / YYYY  
03 / 20 / 2016

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 54 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		

Full Name of Payee <b>NG Slater Corp</b>		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 09 / 2016	
Mailing Address 42 W 38th St Ste 1002		Amount <span style="border: 1px solid black; padding: 2px;">236.00</span>		
City New York	State NY	Zip Code 10018	Transaction ID : D364119	
Purpose of Expenditure Buttons	Category/Type 006	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 09 / 2016		
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4342.96</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <b>Image Pointe</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 10 / 2016	
Mailing Address 1224 La Porte Road		Amount <span style="border: 1px solid black; padding: 2px;">662.49</span>		
City Waterloo	State IA	Zip Code 50702	Transaction ID : D363145	
Purpose of Expenditure Estimated Cost: T-shirts	Category/Type 006	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 10 / 2016		
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">211284.31</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">236.00</span>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) TOTAL Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2016

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 55 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00004036       </div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on					

  

Full Name of Payee <b>Image Pointe</b>			<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           02 / 10 / 2016         </div>		
Mailing Address 1224 La Porte Road			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">491.49</div>		
City Waterloo	State IA	Zip Code 50702	<b>Transaction ID : D363146</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           02 / 10 / 2016         </div>		
Purpose of Expenditure Estimated Cost: T-shirts		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div>	Name of Federal Candidate HILLARY RODHAM CLINTON		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">211284.31</div>	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____		

  

Full Name of Payee <b>SEIU General Fund</b>			<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           02 / 11 / 2016         </div>		
Mailing Address 1800 Massachusetts Ave NW			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">117.27</div>		
City Washington	State DC	Zip Code 20036	<b>Transaction ID : D363154</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           02 / 10 / 2016         </div>		
Purpose of Expenditure Estimated Cost: Banner		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div>	Name of Federal Candidate HILLARY RODHAM CLINTON		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">457842.38</div>	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____		

  

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Michael P. Fishman*  
 Signature

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Date 

03 / 20 / 2016

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 56 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00004036       </div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on					
Full Name of Payee <input type="checkbox"/> Memo Item <b>Cardenas Strategy Group</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 02 / 15 / 2016</div> </div>		
Mailing Address 556 S. Fair Oaks Ave. #158			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">60966.15</div>		
City Pasadena		State CA		Zip Code 91105	
Purpose of Expenditure Television Advertising Buy		Category/Type 004		<b>Transaction ID : D363179</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 02 / 10 / 2016</div> </div>	
Name of Federal Candidate HILLARY RODHAM CLINTON			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    District: _____    State: NV		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">457842.38</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <input type="checkbox"/> Memo Item <b>Cardenas Strategy Group</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 02 / 15 / 2016</div> </div>		
Mailing Address 556 S. Fair Oaks Ave. #158			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">6750.00</div>		
City Pasadena		State CA		Zip Code 91105	
Purpose of Expenditure Partial Payment for TV Ad Production Disclosed on 2/16 24-Hr Rpt.		Category/Type 004		<b>Transaction ID : D363193</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 02 / 10 / 2016</div> </div>	
Name of Federal Candidate HILLARY RODHAM CLINTON			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    District: _____    State: NV		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">457842.38</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;">67716.15</div>		
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
<b>(c) TOTAL</b> Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  <div style="border-top: 1px solid black; width: 100%;"></div>			Date <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 03 / 20 / 2016</div> </div>		

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00004036       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on				
Full Name of Payee <input type="checkbox"/> Memo Item <b>Cardenas Strategy Group</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 02 / 15 / 2016</div> </div>	
Mailing Address <b>556 S. Fair Oaks Ave. #158</b>			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">18600.00</div>	
City <b>Pasadena</b> State <b>CA</b> Zip Code <b>91105</b>		<b>Transaction ID : D363194</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 02 / 10 / 2016</div> </div>		
Purpose of Expenditure <b>Radio Advertising Buy</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate <b>HILLARY RODHAM CLINTON</b>			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>NV</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">457842.38</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item <b>Cardenas Strategy Group</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 02 / 15 / 2016</div> </div>	
Mailing Address <b>556 S. Fair Oaks Ave. #158</b>			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">6750.00</div>	
City <b>Pasadena</b> State <b>CA</b> Zip Code <b>91105</b>		<b>Transaction ID : D363195</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 02 / 10 / 2016</div> </div>		
Purpose of Expenditure <b>Partial Payment for Radio Ad Production Disclosed on 2/16 24-Hr Rpt.</b>		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate <b>HILLARY RODHAM CLINTON</b>			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>NV</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">457842.38</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<b>(a) SUBTOTAL of Itemized Independent Expenditures..... ▶</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;">25350.00</div>	
<b>(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
<b>(c) TOTAL Independent Expenditures..... ▶</b>			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Michael P. Fishman</u>			Date <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 03 / 20 / 2016</div> </div>	

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 58 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		

Full Name of Payee <b>NG Slater Corp</b>		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">02 / 10 / 2016</span>	
Mailing Address 42 W 38th St Ste 1002			Amount <span style="border: 1px solid black; padding: 2px;">31.03</span>	
City New York	State NY	Zip Code 10018	Transaction ID : <b>D364120</b>	
Purpose of Expenditure Buttons		Category/Type <span style="border: 1px solid black; padding: 2px;">006</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">02 / 10 / 2016</span>	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>PA</u>	
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">444.94</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>NG Slater Corp</b>		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">02 / 10 / 2016</span>	
Mailing Address 42 W 38th St Ste 1002			Amount <span style="border: 1px solid black; padding: 2px;">47.96</span>	
City New York	State NY	Zip Code 10018	Transaction ID : <b>D364121</b>	
Purpose of Expenditure Buttons		Category/Type <span style="border: 1px solid black; padding: 2px;">006</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">02 / 10 / 2016</span>	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>	
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">99730.27</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">78.99</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Date

03 / 20 / 2016

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 59 OF 90  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span>				
Full Name of Payee <b>NG Slater Corp</b>			<input type="checkbox"/> Memo Item	
Mailing Address 42 W 38th St Ste 1002			Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> 02 / 10 / 2016	
City New York		State NY	Zip Code 10018	Amount <span style="border:1px solid black; padding:2px;">111.24</span>
Purpose of Expenditure Buttons		Category/Type <span style="border:1px solid black; padding:2px;">006</span>		Transaction ID : D364122 Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> 02 / 10 / 2016
Name of Federal Candidate HILLARY RODHAM CLINTON			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">99730.27</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>Image Pointe</b>			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 1224 La Porte Road			Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> 02 / 10 / 2016	
City Waterloo		State IA	Zip Code 50702	Amount <span style="border:1px solid black; padding:2px;">183.88</span>
Purpose of Expenditure Estimated Cost: T-shirts		Category/Type <span style="border:1px solid black; padding:2px;">006</span>		Transaction ID : D364139 Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> 02 / 10 / 2016
Name of Federal Candidate HILLARY RODHAM CLINTON			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">99730.27</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			<span style="border:1px solid black; padding:2px;">111.24</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶			<span style="border:1px solid black; padding:2px;"></span>	
(c) TOTAL Independent Expenditures.....▶			<span style="border:1px solid black; padding:2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature  <i>Michael P. Fishman</i>			Date <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> 03 / 20 / 2016	
[Electronically Filed]				

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 60 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Cardenas Strategy Group</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 15 / 2016</b>
Mailing Address <b>556 S. Fair Oaks Ave. #158</b>			Amount <b>1408.96</b>
City <b>Pasadena</b>	State <b>CA</b>	Zip Code <b>91105</b>	Transaction ID : <b>D364156</b>
Purpose of Expenditure Remainder of TV Ad Production Costs Disclosed on 2/16 24-Hr Rpt.		Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 10 / 2016</b>
Name of Federal Candidate <b>HILLARY RODHAM CLINTON</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NV</b>
Calendar Year-To-Date Per Election for Office Sought		<b>457842.38</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Cardenas Strategy Group</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 15 / 2016</b>
Mailing Address <b>556 S. Fair Oaks Ave. #158</b>			Amount <b>1408.96</b>
City <b>Pasadena</b>	State <b>CA</b>	Zip Code <b>91105</b>	Transaction ID : <b>D364157</b>
Purpose of Expenditure Remainder of Radio Ad Production Costs Disclosed on 2/16 24-Hr Rpt.		Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 10 / 2016</b>
Name of Federal Candidate <b>HILLARY RODHAM CLINTON</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NV</b>
Calendar Year-To-Date Per Election for Office Sought		<b>457842.38</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>0.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Date

MM / DD / YYYY  
**03 / 20 / 2016**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 61 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>NG Slater Corp</b>		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 11 / 2016</b>	
Mailing Address 42 W 38th St Ste 1002			Amount <b>34.70</b>	
City New York	State NY	Zip Code 10018	Transaction ID : <b>D363148</b>	
Purpose of Expenditure Buttons	Category/Type 006		Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 11 / 2016</b>	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>	
Calendar Year-To-Date Per Election for Office Sought		<b>211284.31</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>NG Slater Corp</b>		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 11 / 2016</b>	
Mailing Address 42 W 38th St Ste 1002			Amount <b>40.50</b>	
City New York	State NY	Zip Code 10018	Transaction ID : <b>D363149</b>	
Purpose of Expenditure Buttons	Category/Type 006		Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 11 / 2016</b>	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>	
Calendar Year-To-Date Per Election for Office Sought		<b>211284.31</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>75.20</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Signature

Date

MM / DD / YYYY  
**03 / 20 / 2016**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 62 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Image Pointe</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 11 / 2016</b>
Mailing Address 1224 La Porte Road			Amount <b>344.34</b>
City Waterloo	State IA	Zip Code 50702	<b>Transaction ID : D363157</b>
Purpose of Expenditure Estimated Cost: T-shirts		Category/ Type <b>006</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 11 / 2016</b>
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NV</b>
Calendar Year-To-Date Per Election for Office Sought		<b>457842.38</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Image Pointe</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 13 / 2016</b>
Mailing Address 1224 La Porte Road			Amount <b>1243.84</b>
City Waterloo	State IA	Zip Code 50702	<b>Transaction ID : D363159</b>
Purpose of Expenditure Estimated Cost: T-shirts		Category/ Type <b>006</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 11 / 2016</b>
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NV</b>
Calendar Year-To-Date Per Election for Office Sought		<b>457842.38</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>0.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Date

MM / DD / YYYY  
**03 / 20 / 2016**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 63 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00004036       </div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on					
Full Name of Payee <b>Image Pointe</b>			<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 02 / 13 / 2016</div> </div>		
Mailing Address 1224 La Porte Road			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1361.42</div>		
City Waterloo		State IA	Zip Code 50702		<b>Transaction ID : D363160</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 02 / 11 / 2016</div> </div>
Purpose of Expenditure Estimated Cost: T-shirts			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div>		
Name of Federal Candidate HILLARY RODHAM CLINTON			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">457842.38</div> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____		
Full Name of Payee <b>The Pivot Group</b>			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 01 / 25 / 2016</div> </div>		
Mailing Address 1720 I Street, NW Suite 550			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">9085.26</div>		
City Washington		State DC	Zip Code 20006		<b>Transaction ID : D364112</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 02 / 11 / 2016</div> </div>
Purpose of Expenditure Payment for Direct Mail As Disclosed on 1/26 24-Hr & 2/20 Monthly Reports			Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div>		
Name of Federal Candidate HILLARY RODHAM CLINTON			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>FL</u>		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">211284.31</div> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; display: inline-block;">9085.26</div>		
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
<b>(c) TOTAL</b> Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature _____ <i>Michael P. Fishman</i>			Date <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 03 / 20 / 2016</div> </div>		

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 64 OF 90  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYY</span>			
Full Name of Payee <b>Image Pointe</b>		<input checked="" type="checkbox"/> Memo Item	
Mailing Address <b>1224 La Porte Road</b>		Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">02</span> / <span style="border:1px solid black; padding:2px;">11</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
City <b>Waterloo</b>	State <b>IA</b>	Zip Code <b>50702</b>	Amount <span style="border:1px solid black; padding:2px;">377.76</span>
Purpose of Expenditure Estimated Cost: T-shirts		Category/ Type <span style="border:1px solid black; padding:2px;">006</span>	Transaction ID : <b>D364140</b> Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">02</span> / <span style="border:1px solid black; padding:2px;">11</span> / <span style="border:1px solid black; padding:2px;">2016</span>
Name of Federal Candidate <b>HILLARY RODHAM CLINTON</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>CA</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">377.76</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>Image Pointe</b>		<input checked="" type="checkbox"/> Memo Item	
Mailing Address <b>1224 La Porte Road</b>		Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">02</span> / <span style="border:1px solid black; padding:2px;">11</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
City <b>Waterloo</b>	State <b>IA</b>	Zip Code <b>50702</b>	Amount <span style="border:1px solid black; padding:2px;">165.67</span>
Purpose of Expenditure Estimated Cost: T-shirts		Category/ Type <span style="border:1px solid black; padding:2px;">006</span>	Transaction ID : <b>D364141</b> Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">02</span> / <span style="border:1px solid black; padding:2px;">11</span> / <span style="border:1px solid black; padding:2px;">2016</span>
Name of Federal Candidate <b>HILLARY RODHAM CLINTON</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>OH</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">340.67</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶		<span style="border:1px solid black; padding:2px;">0.00</span>	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶		<span style="border:1px solid black; padding:2px;"></span>	
(c) <b>TOTAL</b> Independent Expenditures..... ▶		<span style="border:1px solid black; padding:2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  <i>Michael P. Fishman</i>		Date <span style="border:1px solid black; padding:2px;">03</span> / <span style="border:1px solid black; padding:2px;">20</span> / <span style="border:1px solid black; padding:2px;">2016</span> <i>[Electronically Filed]</i>	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 65 OF 90  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border:1px solid black; padding:2px;">M M / D D / Y Y Y Y Y Y</span>			
Full Name of Payee <b>Image Pointe</b>		<input checked="" type="checkbox"/> Memo Item	
Mailing Address <b>1224 La Porte Road</b>		Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">03</span> / <span style="border:1px solid black; padding:2px;">11</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
City <b>Waterloo</b>		State <b>IA</b>	
Zip Code <b>50702</b>		Amount <span style="border:1px solid black; padding:2px;">413.91</span>	
Purpose of Expenditure Estimated Cost: T-shirts		Category/Type <span style="border:1px solid black; padding:2px;">006</span>	
Name of Federal Candidate <b>HILLARY RODHAM CLINTON</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate		District: <b>PA</b>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<span style="border:1px solid black; padding:2px;">444.94</span>		2016	
Full Name of Payee <b>NG Slater Corp</b>		<input type="checkbox"/> Memo Item	
Mailing Address <b>42 W 38th St</b>		Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">02</span> / <span style="border:1px solid black; padding:2px;">12</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
City <b>New York</b>		State <b>NY</b>	
Zip Code <b>10018</b>		Amount <span style="border:1px solid black; padding:2px;">139.80</span>	
Purpose of Expenditure Buttons		Category/Type <span style="border:1px solid black; padding:2px;">006</span>	
Name of Federal Candidate <b>HILLARY RODHAM CLINTON</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate		District: <b>NV</b>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<span style="border:1px solid black; padding:2px;">457842.38</span>		2016	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		<span style="border:1px solid black; padding:2px;">139.80</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶		<span style="border:1px solid black; padding:2px;"></span>	
(c) TOTAL Independent Expenditures..... ▶		<span style="border:1px solid black; padding:2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  <i>Michael P. Fishman</i>		Date <span style="border:1px solid black; padding:2px;">03</span> / <span style="border:1px solid black; padding:2px;">20</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
		[Electronically Filed]	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 66 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00004036       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>AL Media, LLC</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 13 / 2016 </div>	
Mailing Address 222 W. Ontario St. Suite 600		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 24875.00 </div>	
City Chicago	State IL	Zip Code 60654	<b>Transaction ID : D363161</b>
Purpose of Expenditure Digital Advertising	Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 13 / 2016 </div>	
Name of Federal Candidate HILLARY RODHAM CLINTON		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>SC</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">729056.00</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>AL Media, LLC</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 13 / 2016 </div>	
Mailing Address 222 W. Ontario St. Suite 600		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 24875.00 </div>	
City Chicago	State IL	Zip Code 60654	<b>Transaction ID : D363162</b>
Purpose of Expenditure Digital Advertising	Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 13 / 2016 </div>	
Name of Federal Candidate DONALD J TRUMP		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>SC</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">729056.00</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Date

MM / DD / YYYY  
03 / 20 / 2016

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 67 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00004036       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>AL Media, LLC</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 13 / 2016 </div>	
Mailing Address 222 W. Ontario St. Suite 600		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 24875.00 </div>	
City Chicago	State IL	Zip Code 60654	<b>Transaction ID : D363163</b>
Purpose of Expenditure Digital Advertising	Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 13 / 2016 </div>	
Name of Federal Candidate MARCO RUBIO		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 729056.00 </div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>AL Media, LLC</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 13 / 2016 </div>	
Mailing Address 222 W. Ontario St. Suite 600		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 24875.00 </div>	
City Chicago	State IL	Zip Code 60654	<b>Transaction ID : D363164</b>
Purpose of Expenditure Digital Advertising	Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 13 / 2016 </div>	
Name of Federal Candidate RAFAEL EDWARD TED CRUZ		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 729056.00 </div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Date

MM / DD / YYYY  
03 / 20 / 2016

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 68 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00004036       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYYYY</span>				
Full Name of Payee <b>Fieldworks</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYYYY</span> </div>	
Mailing Address 2852 Connecticut Ave., NW			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">         67792.66       </div>	
City Washington		State DC	Zip Code 20008	
Purpose of Expenditure Canvassing Services		Category/Type <span style="border: 1px solid black; padding: 0 5px;">001</span>		
Name of Federal Candidate DONALD J TRUMP			Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>CO</u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">         270254.33       </div>			<div style="border: 1px solid black; padding: 2px; display: inline-block;">         270254.33       </div>	

  

Full Name of Payee <b>Fieldworks</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="border: 1px solid black; padding: 0 5px;">MM</span> / <span style="border: 1px solid black; padding: 0 5px;">DD</span> / <span style="border: 1px solid black; padding: 0 5px;">YYYYYY</span> </div>	
Mailing Address 2852 Connecticut Ave., NW			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">         67792.67       </div>	
City Washington		State DC	Zip Code 20008	
Purpose of Expenditure Canvassing Services		Category/Type <span style="border: 1px solid black; padding: 0 5px;">001</span>		
Name of Federal Candidate MARCO RUBIO			Office Sought: <input type="checkbox"/> House    District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>CO</u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">         270254.33       </div>			<div style="border: 1px solid black; padding: 2px; display: inline-block;">         270254.33       </div>	

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         135585.33       </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         67792.67       </div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">         20008       </div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Michael P. Fishman*  
 Signature

[Electronically Filed]    Date MM / DD / YYYYYY

Full Name of Payee <b>Fieldworks</b>		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 15 / 2016	
Mailing Address 2852 Connecticut Ave., NW			Amount 72276.33	
City Washington	State DC	Zip Code 20008	Transaction ID : <b>D363189</b> Date of Disbursement or Obligation MM / DD / YYYY 02 / 15 / 2016	
Purpose of Expenditure Canvassing Services		Category/ Type 001		
Name of Federal Candidate DONALD J TRUMP		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought		457842.38	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	140069.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	▶	
(c) <b>TOTAL</b> Independent Expenditures.....	▶	

Three digital displays are shown, each with a set of letters above it. The first display shows '03' with 'M' and 'M' above it. The second display shows '20' with 'D' and 'D' above it. The third display shows '2016' with 'Y', 'Y', 'Y', and 'Y' above it.

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 70 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Fieldworks</b>		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 15 / 2016</b>
Mailing Address <b>2852 Connecticut Ave., NW</b>			Amount <b>72276.33</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20008</b>	<b>Transaction ID : D363190</b>
Purpose of Expenditure <b>Canvassing Services</b>	Category/Type <b>001</b>		Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 15 / 2016</b>
Name of Federal Candidate <b>MARCO RUBIO</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NV</b>
Calendar Year-To-Date Per Election for Office Sought <b>457842.38</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Fieldworks</b>		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 15 / 2016</b>
Mailing Address <b>2852 Connecticut Ave., NW</b>			Amount <b>72276.34</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20008</b>	<b>Transaction ID : D363191</b>
Purpose of Expenditure <b>Canvassing Services</b>	Category/Type <b>001</b>		Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 15 / 2016</b>
Name of Federal Candidate <b>RAFAEL EDWARD TED CRUZ</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NV</b>
Calendar Year-To-Date Per Election for Office Sought <b>457842.38</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>144552.67</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Signature

Date

MM / DD / YYYY  
**03 / 20 / 2016**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 71 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>SEIU General Fund</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 18 / 2016</b>
Mailing Address 1800 Massachusetts Ave NW			Amount <b>175.30</b>
City Washington	State DC	Zip Code 20036	<b>Transaction ID : D363259</b>
Purpose of Expenditure Estimated Cost: Rally Signs		Category/Type <b>006</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 15 / 2016</b>
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NV</b>
Calendar Year-To-Date Per Election for Office Sought		<b>457842.38</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>SEIU General Fund</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 18 / 2016</b>
Mailing Address 1800 Massachusetts Ave NW			Amount <b>80.67</b>
City Washington	State DC	Zip Code 20036	<b>Transaction ID : D363260</b>
Purpose of Expenditure Estimated Cost: Stickers		Category/Type <b>006</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 15 / 2016</b>
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NV</b>
Calendar Year-To-Date Per Election for Office Sought		<b>457842.38</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>0.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Date

MM / DD / YYYY  
**03 / 20 / 2016**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 72 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00004036       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>iAmerica Action</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 16 / 2016 </div>	
Mailing Address 1800 Massachusetts Ave., NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2638.68</div>	
City Washington	State DC	Zip Code 20036	<b>Transaction ID : D363239</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 16 / 2016 </div>
Purpose of Expenditure Estimated Cost: Canvassing Services		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: NV	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">457842.38</div> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Image Pointe</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 16 / 2016 </div>	
Mailing Address 1224 La Porte Road		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1121.48</div>	
City Waterloo	State IA	Zip Code 50702	<b>Transaction ID : D363240</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 16 / 2016 </div>
Purpose of Expenditure Estimated Cost: T-shirts		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div>	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: VA	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">4588.01</div> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Date

MM / DD / YYYY  
03 / 20 / 2016

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 73 OF 90  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00004036</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>				
Full Name of Payee <b>Image Pointe</b>			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>	
Mailing Address <b>1224 La Porte Road</b>			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
City <b>Waterloo</b> State <b>IA</b> Zip Code <b>50702</b>		Transaction ID : <b>D363261</b> Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>		
Purpose of Expenditure Estimated Cost: T-shirts		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div>		
Name of Federal Candidate <b>HILLARY RODHAM CLINTON</b>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NV</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>EI Mundo Newspaper</b>			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>	
Mailing Address <b>760 N. Eastern Ave. #110</b>			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
City <b>Las Vegas</b> State <b>NV</b> Zip Code <b>89101</b>		Transaction ID : <b>D363262</b> Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>		
Purpose of Expenditure Newspaper Advertising		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate <b>HILLARY RODHAM CLINTON</b>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NV</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 0.00	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
(c) <b>TOTAL</b> Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Michael P. Fishman</u>			Date <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>	
[Electronically Filed]				

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 74 OF 90  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		

Full Name of Payee <b>NG Slater Corp</b>		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>02 / 17 / 2016</b>
Mailing Address 42 W 38th St Ste 1002			Amount <span style="border: 1px solid black; padding: 2px;">22.91</span>
City New York	State NY	Zip Code 10018	<b>Transaction ID : D364123</b>
Purpose of Expenditure Buttons	Category/ Type	<span style="border: 1px solid black; padding: 2px;">006</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>02 / 17 / 2016</b>
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">211284.31</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>ASJ Media LLC</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>02 / 18 / 2016</b>
Mailing Address 1210 S. Brand Blvd.			Amount <span style="border: 1px solid black; padding: 2px;">2000.00</span>
City Glendale	State CA	Zip Code 91204	<b>Transaction ID : D363256</b>
Purpose of Expenditure Newspaper Advertising	Category/ Type	<span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>02 / 18 / 2016</b>
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NV</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">457842.38</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">22.91</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
**03 / 20 / 2016**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 75 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00004036       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>The Pivot Group</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 18 / 2016 </div>	
Mailing Address 1720 I Street, NW Suite 550		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1065.96 </div>	
City State Zip Code Washington DC 20006	<b>Transaction ID : D363258</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 18 / 2016 </div>		
Purpose of Expenditure Newspaper Advertising Design	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <b>HILLARY RODHAM CLINTON</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 457842.38 </div>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Pearson Community Center</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 18 / 2016 </div>	
Mailing Address 1625 N. Carey Ave.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 180.00 </div>	
City State Zip Code North Las Vegas NV 89032	<b>Transaction ID : D363741</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 18 / 2016 </div>		
Purpose of Expenditure Room Rental	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <b>HILLARY RODHAM CLINTON</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 457842.38 </div>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Date

MM / DD / YYYY  
03 / 20 / 2016

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 76 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		

Full Name of Payee <b>SEIU General Fund</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">02 / 18 / 2016</span>	
Mailing Address 1800 Massachusetts Ave NW			Amount <span style="border: 1px solid black; padding: 2px;">163.58</span>	
City Washington	State DC	Zip Code 20036	Transaction ID : D364127	
Purpose of Expenditure Estimated Cost: Rally Signs		Category/Type <span style="border: 1px solid black; padding: 2px;">006</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">02 / 18 / 2016</span>	
Name of Federal Candidate KATHLEEN ALANA MCGINTY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">163.58</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Philippine News Las Vegas</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">02 / 19 / 2016</span>	
Mailing Address 1308 Bayshore Hwy Suite 120			Amount <span style="border: 1px solid black; padding: 2px;">1000.00</span>	
City Burlingame	State CA	Zip Code 94010	Transaction ID : D363263	
Purpose of Expenditure Estimated Cost: Newspaper Advertising		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">02 / 19 / 2016</span>	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">457842.38</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) TOTAL Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Date

03 / 20 / 2016

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 77 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00004036       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>				
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Image Pointe</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 19 / 2016 </div>	
Mailing Address 1224 La Porte Road			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2587.60</div>	
City Waterloo State IA Zip Code 50702		<b>Transaction ID : D363264</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 19 / 2016 </div>		
Purpose of Expenditure Estimated Cost: T-shirts		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div>		
Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <b>HILLARY RODHAM CLINTON</b>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>TX</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">99730.27</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>AL Media, LLC</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 20 / 2016 </div>	
Mailing Address 222 W. Ontario St. Suite 600			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">65150.00</div>	
City Chicago State IL Zip Code 60654		<b>Transaction ID : D363267</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 20 / 2016 </div>		
Purpose of Expenditure Digital Advertising		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <b>HILLARY RODHAM CLINTON</b>			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>SC</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">729056.00</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
<b>(c) TOTAL</b> Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Michael P. Fishman</u>			Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  03 / 20 / 2016 </div>	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 78 OF 90  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00004036</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>				
Full Name of Payee <b>Image Pointe</b>			<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 02 / 23 / 2016	
Mailing Address 1224 La Porte Road			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 1297.10	
City Waterloo		State IA	Zip Code 50702	
Purpose of Expenditure Estimated Cost: T-shirts		Category/ Type 006		Transaction ID : D363304 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 02 / 23 / 2016
Name of Federal Candidate HILLARY RODHAM CLINTON			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: TX	
Calendar Year-To-Date Per Election for Office Sought			<div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 99730.27 Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>NG Slater Corp</b>			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 02 / 24 / 2016	
Mailing Address 42 W 38th St Ste 1002			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 132.30	
City New York		State NY	Zip Code 10018	
Purpose of Expenditure Buttons		Category/ Type 006		Transaction ID : D363718 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 02 / 24 / 2016
Name of Federal Candidate HILLARY RODHAM CLINTON			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: TX	
Calendar Year-To-Date Per Election for Office Sought			<div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 99730.27 Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 132.30	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div>	
(c) <b>TOTAL</b> Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature  <i>Michael P. Fishman</i>			Date <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 03 / 20 / 2016	

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 79 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036																								
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1" style="display:inline-table; margin-left:10px"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td></td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table; margin-left:10px"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td></td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table; margin-left:10px"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>			M	M					D	D					Y	Y	Y	Y	Y	Y						
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Full Name of Payee <b>Cardenas Strategy Group</b>		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <table border="1" style="display:inline-table"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>02</td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>24</td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> 2016		M	M		02			D	D		24			Y	Y	Y	Y	Y	Y						
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Purpose of Expenditure Radio Advertising Buy		Category/Type 004	Date of Disbursement or Obligation <table border="1" style="display:inline-table"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>02</td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>24</td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> 2016		M	M		02			D	D		24			Y	Y	Y	Y	Y	Y						
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Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

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 2016
 

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 80 OF 90  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00004036</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>				
Full Name of Payee <b>Image Pointe</b>			<input checked="" type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
Mailing Address <b>1224 La Porte Road</b>			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> <b>651.37</b>	
City    State    Zip Code <b>Waterloo    IA    50702</b>		<b>Transaction ID : D363721</b> Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>		
Purpose of Expenditure Estimated Cost: T-shirts		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div>		
Name of Federal Candidate <b>HILLARY RODHAM CLINTON</b>			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>MI</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> <b>764.29</b>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>Cardenas Strategy Group</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
Mailing Address <b>556 S. Fair Oaks Ave. #158</b>			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> <b>48301.58</b>	
City    State    Zip Code <b>Pasadena    CA    91105</b>		<b>Transaction ID : D363722</b> Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>		
Purpose of Expenditure Television Advertising Buy		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate <b>HILLARY RODHAM CLINTON</b>			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>CO</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> <b>270254.33</b>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> <b>48301.58</b>	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div>	
(c) <b>TOTAL</b> Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  <div style="display: flex; justify-content: space-between;"><div style="width: 40%;">Signature  <div style="border-top: 1px solid black; width: 100%;"></div> <i>Michael P. Fishman</i></div><div style="width: 20%; text-align: center;">[Electronically Filed]</div><div style="width: 20%; text-align: center;">Date    <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> <b>03 / 20 / 2016</b></div><div style="width: 20%;"></div></div>				



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 81 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036																								
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Full Name of Payee <b>Cardenas Strategy Group</b>		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <table border="1" style="display:inline-table"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>02</td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>24</td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> 2016		M	M		02			D	D		24			Y	Y	Y	Y	Y	Y						
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Purpose of Expenditure Television Advertising Buy		Category/Type 004	Date of Disbursement or Obligation <table border="1" style="display:inline-table"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>02</td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>24</td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> 2016		M	M		02			D	D		24			Y	Y	Y	Y	Y	Y						
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Full Name of Payee <b>Revolution Media Enterprises Inc</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <table border="1" style="display:inline-table"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>02</td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>24</td><td></td><td></td></tr> </table> / <table border="1" style="display:inline-table"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> 2016		M	M		02			D	D		24			Y	Y	Y	Y	Y	Y						
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Michael P. Fishman

[Electronically Filed]

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 2016

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 82 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00004036       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span>		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Revolution Media Enterprises Inc</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           02 / 24 / 2016         </div>	
Mailing Address 1306 Pennsylvania Ave Ave SE Ste 101		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           1106.38         </div>	
City Washington State DC Zip Code 20003	<b>Transaction ID : D364153</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           02 / 24 / 2016         </div>		
Purpose of Expenditure Radio Advertising Production	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <b>HILLARY RODHAM CLINTON</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">           270254.33         </div>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CO</u> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Revolution Media Enterprises Inc</b>		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           02 / 24 / 2016         </div>	
Mailing Address 1306 Pennsylvania Ave Ave SE Ste 101		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           1106.39         </div>	
City Washington State DC Zip Code 20003	<b>Transaction ID : D364154</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           02 / 24 / 2016         </div>		
Purpose of Expenditure Television Advertising Production	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <b>HILLARY RODHAM CLINTON</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">           99730.27         </div>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Date

03 / 20 / 2016

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 83 OF 90  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYY</span>			
Full Name of Payee <b>Revolution Media Enterprises Inc</b>		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 1306 Pennsylvania Ave Ave SE Ste 101		Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">02</span> / <span style="border:1px solid black; padding:2px;">24</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
City State Zip Code Washington DC 20003		Amount <span style="border:1px solid black; padding:2px;">1106.39</span>	
Purpose of Expenditure Radio Advertising Production		Category/Type <span style="border:1px solid black; padding:2px;">004</span>	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">99730.27</span>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>	
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>NG Slater Corp</b>		<input type="checkbox"/> Memo Item	
Mailing Address 42 W 38th St Ste 1002		Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">01</span> / <span style="border:1px solid black; padding:2px;">20</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
City State Zip Code New York NY 10018		Amount <span style="border:1px solid black; padding:2px;">18.75</span>	
Purpose of Expenditure Payment for Buttons as Disclosed on 2/12 48-Hr Notice		Category/Type <span style="border:1px solid black; padding:2px;">006</span>	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">211284.31</span>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>	
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		<span style="border:1px solid black; padding:2px;">18.75</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶		<span style="border:1px solid black; padding:2px;"></span>	
(c) TOTAL Independent Expenditures.....▶		<span style="border:1px solid black; padding:2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  <i>Michael P. Fishman</i>		Date <span style="border:1px solid black; padding:2px;">03</span> / <span style="border:1px solid black; padding:2px;">20</span> / <span style="border:1px solid black; padding:2px;">2016</span> <i>[Electronically Filed]</i>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 84 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00004036       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>		

Full Name of Payee <b>NG Slater Corp</b>		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 26 / 2016 </div>	
Mailing Address 42 W 38th St Ste 1002		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">123.60</div>		Transaction ID : <b>D363729</b>	
City New York	State NY	Zip Code 10018	Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 26 / 2016 </div>		
Purpose of Expenditure Buttons		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div>		Name of Federal Candidate HILLARY RODHAM CLINTON	
<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>MN</b>			
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">2852.64</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	

Full Name of Payee <b>NG Slater Corp</b>		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 26 / 2016 </div>	
Mailing Address 42 W 38th St Ste 1002		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">175.00</div>		Transaction ID : <b>D363730</b>	
City New York	State NY	Zip Code 10018	Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  02 / 26 / 2016 </div>		
Purpose of Expenditure Buttons		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div>		Name of Federal Candidate HILLARY RODHAM CLINTON	
<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>OH</b>			
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">340.67</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;">298.60</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Date

MM / DD / YYYY  
 03 / 20 / 2016

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 85 OF 90  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00004036</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>				
Full Name of Payee <b>NG Slater Corp</b>			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>	
Mailing Address 42 W 38th St Ste 1002			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 132.30	
City New York		State NY	Zip Code 10018	
Purpose of Expenditure Buttons		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div>		Transaction ID : <b>D363731</b> Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>
Name of Federal Candidate HILLARY RODHAM CLINTON			Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 99730.27			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>SEIU General Fund</b>			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>	
Mailing Address 1800 Massachusetts Ave NW			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 83.74	
City Washington		State DC	Zip Code 20036	
Purpose of Expenditure Estimated Cost: Rally Signs		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div>		Transaction ID : <b>D363733</b> Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>
Name of Federal Candidate HILLARY RODHAM CLINTON			Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MN</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 2852.64			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 132.30	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
(c) <b>TOTAL</b> Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature  <i>Michael P. Fishman</i>			Date <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 50px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 03 / 20 / 2016	
[Electronically Filed]				

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 86 OF 90  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		

Full Name of Payee <b>Image Pointe</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 26 / 2016
Mailing Address 1224 La Porte Road			Amount <span style="border: 1px solid black; padding: 2px;">651.94</span>
City Waterloo	State IA	Zip Code 50702	<b>Transaction ID : D363735</b>
Purpose of Expenditure Estimated Cost: Skullies	Category/ Type	<span style="border: 1px solid black; padding: 2px;">006</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 26 / 2016
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MN</u>
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">2852.64</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Image Pointe</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 26 / 2016
Mailing Address 1224 La Porte Road			Amount <span style="border: 1px solid black; padding: 2px;">1366.20</span>
City Waterloo	State IA	Zip Code 50702	<b>Transaction ID : D363736</b>
Purpose of Expenditure Estimated Cost: T-shirts	Category/ Type	<span style="border: 1px solid black; padding: 2px;">006</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 26 / 2016
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MN</u>
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">2852.64</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y  
03 / 20 / 2016

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 87 OF 90  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border:1px solid black; padding:2px;">M M / D D / Y Y Y Y Y Y</span>				
Full Name of Payee <b>Image Pointe</b>			<input checked="" type="checkbox"/> Memo Item	
Mailing Address 1224 La Porte Road			Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">02</span> / <span style="border:1px solid black; padding:2px;">26</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
City Waterloo		State IA	Zip Code 50702	Amount <span style="border:1px solid black; padding:2px;">1311.10</span>
Purpose of Expenditure Estimated Cost: T-shirts		Category/ Type <span style="border:1px solid black; padding:2px;">006</span>		Transaction ID : <b>D363737</b> Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">02</span> / <span style="border:1px solid black; padding:2px;">26</span> / <span style="border:1px solid black; padding:2px;">2016</span>
Name of Federal Candidate HILLARY RODHAM CLINTON			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate			District: _____ State: <b>TX</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">99730.27</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>NG Slater Corp</b>			<input type="checkbox"/> Memo Item	
Mailing Address 42 W 38th St Ste 1002			Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">02</span> / <span style="border:1px solid black; padding:2px;">27</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
City New York		State NY	Zip Code 10018	Amount <span style="border:1px solid black; padding:2px;">315.20</span>
Purpose of Expenditure Buttons		Category/ Type <span style="border:1px solid black; padding:2px;">006</span>		Transaction ID : <b>D363732</b> Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">02</span> / <span style="border:1px solid black; padding:2px;">27</span> / <span style="border:1px solid black; padding:2px;">2016</span>
Name of Federal Candidate HILLARY RODHAM CLINTON			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate			District: _____ State: <b>VA</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">4588.01</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<span style="border:1px solid black; padding:2px;">315.20</span>	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<span style="border:1px solid black; padding:2px;"></span>	
(c) <b>TOTAL</b> Independent Expenditures..... ▶			<span style="border:1px solid black; padding:2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature  <i>Michael P. Fishman</i>			Date <span style="border:1px solid black; padding:2px;">03</span> / <span style="border:1px solid black; padding:2px;">20</span> / <span style="border:1px solid black; padding:2px;">2016</span> <i>[Electronically Filed]</i>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 88 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		

Full Name of Payee <b>SEIU General Fund</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">02 / 27 / 2016</span>	
Mailing Address 1800 Massachusetts Ave NW			Amount <span style="border: 1px solid black; padding: 2px;">50.00</span>	
City Washington	State DC	Zip Code 20036	Transaction ID : <b>D363734</b>	
Purpose of Expenditure Estimated Cost: Rally Signs		Category/Type <span style="border: 1px solid black; padding: 2px;">006</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">02 / 27 / 2016</span>	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>	
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">4588.01</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Image Pointe</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">02 / 27 / 2016</span>	
Mailing Address 1224 La Porte Road			Amount <span style="border: 1px solid black; padding: 2px;">1060.70</span>	
City Waterloo	State IA	Zip Code 50702	Transaction ID : <b>D363738</b>	
Purpose of Expenditure Estimated Cost: Skullies		Category/Type <span style="border: 1px solid black; padding: 2px;">006</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">02 / 27 / 2016</span>	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>	
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">4588.01</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Date

03 / 20 / 2016

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 89 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		

Full Name of Payee <b>Image Pointe</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 27 / 2016	
Mailing Address 1224 La Porte Road		Amount <span style="border: 1px solid black; padding: 2px;">2040.63</span>		
City Waterloo	State IA	Zip Code 50702	Transaction ID : <b>D363739</b>	
Purpose of Expenditure Estimated Cost: T-shirts		Category/ Type <span style="border: 1px solid black; padding: 2px;">006</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 27 / 2016	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>	
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">4588.01</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Image Pointe</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 29 / 2016	
Mailing Address 1224 La Porte Road		Amount <span style="border: 1px solid black; padding: 2px;">3438.66</span>		
City Waterloo	State IA	Zip Code 50702	Transaction ID : <b>D363866</b>	
Purpose of Expenditure Estimated Cost: T-shirts		Category/ Type <span style="border: 1px solid black; padding: 2px;">006</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 02 / 29 / 2016	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>DC</u>	
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">4342.96</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2016

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 90 OF 90  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00004036
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		

Full Name of Payee <b>NG Slater Corp</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">02 / 29 / 2016</span>	
Mailing Address 42 W 38th St Ste 1002			Amount <span style="border: 1px solid black; padding: 2px;">340.11</span>	
City New York	State NY	Zip Code 10018	Transaction ID : <b>D364124</b>	
Purpose of Expenditure Estimated Cost: Buttons		Category/Type <span style="border: 1px solid black; padding: 2px;">006</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">02 / 29 / 2016</span>	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>DC</u>	
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">4342.96</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>NG Slater Corp</b>		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">02 / 29 / 2016</span>	
Mailing Address 42 W 38th St Ste 1002			Amount <span style="border: 1px solid black; padding: 2px;">46.29</span>	
City New York	State NY	Zip Code 10018	Transaction ID : <b>D364126</b>	
Purpose of Expenditure Buttons		Category/Type <span style="border: 1px solid black; padding: 2px;">006</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">02 / 29 / 2016</span>	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>DC</u>	
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">4342.96</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">46.29</span>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) TOTAL Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">1156097.03</span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Date

03 / 20 / 2016

Signature